

Please type a plus sign (+) inside this box



Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	Attorney Docket Number	GAMBRO-256
	First Named Inventor	Raymond A. Edgson
	<b>COMPLETE IF KNOWN</b>	
	Application Number	09/937,738
	Filing Date	
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	Group Art Unit	N/A
Examiner Name		Not Yet Assigned

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR STERILISING A HEAT SENSITIVE FLUID

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

03/30/00

as United States Application Number or PCT International

Application No.

PCT/SE00/00614

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9901165-2	SE	03/30/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9903331-8	SE	09/16/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Please type a plus sign (+) inside this box +

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

Direct all correspondence to:	<input checked="" type="checkbox"/> <b>X</b>	Customer Number or Bar Code Label	OR <input type="checkbox"/>	Correspondence address below
 000530				

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Raymond Anthony

Family Name  
or Surname

Edgson

Inventor's  
Signature

*[Signature]*

Date

20/2/02

Residence: City

Litlington

State

United Kingdom

Country

Citizenship

United Kingdom

Mailing  
Address:

Ramscroft, Malting Lane  
Litlington, Nr. ~~Royston~~ Royston

City

State

ZIP

Country

United Kingdom

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Michael John

Family Name  
or Surname

Dunkley

Inventor's  
Signature

*[Signature]*

Date

28.3.02

Residence: City

Cambridge

State

United Kingdom

Country

Citizenship

United Kingdom

Mailing  
Address:

13 Cockburn Street

City

Cambridge

State

ZIP

CB1 3NB

Country

United Kingdom

☒ **X**

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box ☐

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## DECLARATION

### ADDITIONAL INVENTOR(S)

#### Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Richard J.

Family Name  
or Surname

Hammond

Inventor's  
Signature

R.J. Hammond

Date

28.3.02

Residence: City

Cambridge

State

Country

United Kingdom

Citizenship

United Kingdom

Mailing  
Address:

16 Granta Terrace  
Great Shelford

City

Cambridge

State

ZIP

CB4 3NF

Country

United Kingdom

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Eric

Family Name  
or Surname

Wilkinson

Inventor's  
Signature

E. Wilkinson

Date

2/4/02

Residence: City

Cambridgeshire

State

Country

United Kingdom

Citizenship

United Kingdom

Mailing  
Address:

14 Chequers Croft,  
Hilton

City

Cambridgeshire

State

ZIP

PE18 9PD

Country

United Kingdom

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing  
Address:

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing  
Address:

City

State

ZIP

Country